

# UNIFORM CLERKSHIP HANDBOOK INFORMATION

**DEADLINE FOR RECEIPT OF AGREEMENT AND INFORMATION BY AACPM:  
JULY 28, 2011**

**PLEASE PRINT CLEARLY:**

**Program Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Clerkship Director:** \_\_\_\_\_, DPM      **Phone #:** \_\_\_\_\_

**Contact, if different:** \_\_\_\_\_      **Phone #:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Program Website:** \_\_\_\_\_

**Fax Number:** \_\_\_\_\_ **# Clerks Per Month:** \_\_\_\_\_ Also accepting applications via:  Email  Fax

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**I. Initial Applicant Requirements (required to apply, in addition to the Clerkship Application):**

Photograph       Car required       CV       Transcript  
 Letter of Interest       US Citizenship       # Ltrs of Rec       Part I Board Scores  
Other/Comments \_\_\_\_\_

**II. Additional Applicant Requirements (required upon acceptance):**

Drug Test – submitted by student       Fingerprinting – submitted by student       HIPAA Training  
 Drug Test – done upon arrival at hospital       Fingerprinting – done upon arrival at hospital       Background Check  
 Doctor/clinic Immunization Verification required       Verification of Liability Insurance      Type \_\_\_\_\_  
 Immunization Verification - Letter from School acceptable      Approx Cost \_\_\_\_\_  
Other/Comments \_\_\_\_\_

**III. Schools from which you accept clerks:**

**Schools from which you accept residents:**

<input type="checkbox"/> All	<input type="checkbox"/> CSPM	<input type="checkbox"/> OCPM	<input type="checkbox"/> WUCPM	<input type="checkbox"/> All	<input type="checkbox"/> CSPM	<input type="checkbox"/> OCPM	<input type="checkbox"/> WUCPM
<input type="checkbox"/> AZPod	<input type="checkbox"/> CPMS	<input type="checkbox"/> SCPM		<input type="checkbox"/> AZPod	<input type="checkbox"/> CPMS	<input type="checkbox"/> SCPM	
<input type="checkbox"/> BUSPM	<input type="checkbox"/> NYCPM	<input type="checkbox"/> TUSPM		<input type="checkbox"/> BUSPM	<input type="checkbox"/> NYCPM	<input type="checkbox"/> TUSPM	

**IV. Benefits:**

Meals       Housing Provided (Approx Cost \_\_\_\_\_)       Contact Program for a list of housing suggestions  
Other/Comments \_\_\_\_\_

**V. CASPR Participation:**

Residency program for 2012	<input type="checkbox"/> Yes <input type="checkbox"/> No	Clerkship Required	<input type="checkbox"/> Yes <input type="checkbox"/> No
US Citizenship Required for Residency	<input type="checkbox"/> Yes <input type="checkbox"/> No	Clerks usually given priority	<input type="checkbox"/> Yes <input type="checkbox"/> No

**VI. Program Overview**

**Participation Agreement (Signature Required):**

**As a participant in the Uniform Clerkship Application Program, I agree that no clerkship requests will be accepted, scheduled or established either by written application, telephone or other electronic communication prior to the October 15<sup>th</sup> start date for the 2012-2013 training year.**

\_\_\_\_\_  
Signature of Clerkship Program Director (Required)

\_\_\_\_\_  
Date

\*Note: SCPM third year students will be applying between August & October 2011 for clerkships January through March 2012. This is a separate group, not included with the information for 2012-2013 training years. Applicants will use the 2011 application.

[Updated 6/14/ 2011]